INSTRUCTIONS FOR MEDICATION LOG

Purpose

- Documentation of medication administration and monitoring for benefits/side effects
- Form completion is *required* for medications prescribed for managing behaviors, and is *optional* for all other prescribed medications (e.g., insulin, antibiotics)

Completion

Who: All DHR approved foster family home providers and any other foster care providers who do not already have an established documentation procedure

When: As medications are administered

<u>Filing</u>

1. Foster care providers

File the copy of the completed form at the end of each month in the child's record maintained by the foster care provider <u>and</u> submit the original to the child's worker.

2. Child welfare workers

File the original in the family's case record with the ISP that covers the month for which the form was completed.

Specific Sections on Form

Medication/Dosage/Frequency: Enter information from prescription.

- Medication name (e.g., Ritalin)
- Prescribing physician (e.g., Dr. Jones)
- Amount to administer (e.g., 1 capsule)
- Frequency for administration (e.g., every 4 hours)

Hour: Enter the actual hours dosage is to be administered

Columns numbered 1 – 31: Columns are numbered to correspond with # of days in a month

The person administering the medication shall initial in the appropriate column and on the appropriate row to indicate the dosage was administered as prescribed.

Notes: This section is used to document

- comments (e.g., variability in dosage, amount, time administered, missed dosages, noticeable benefits, side effects) and
- names of persons initialing the form when more than one (1) person is responsible for administering a medication.

Implementation Information: Many children will need medications administered in settings/locations other than the foster family home (e.g., at school, during visits). Counties are responsible for determining on a case-by-case basis how the documentation will occur and how the information is captured on the log.